#### **Video Conference on COVID-19**

## 06/05/2020

**Attendance:** Minister Harris, Secretary General, CMO, HSE Chair, HSE CEO, HSE COO, Ms J Lonergan, Ms E Scanlon (minute taker)

#### **Minutes**

The minutes of the previous meeting (22/04/2020) were agreed.

# **Testing and Tracing**

Minister Harris noted the significant ramping up of testing capacity and thanked the HSE CEO and team for their work in this regard.

HSE CEO outlined that learnings from that process of ramping up include a more in-depth understanding within the HSE of the end-to-end logistics of swab to contact tracing. Improving those linkages and automating as much as possible will contribute to faster turnaround times, as will leveraging laboratory capacity in Ireland and in Germany.

CMO noted that the scaling up of testing is allowing for the use of a new, broader case definition for COVID-19 testing. The additional testing capacity will also allow NPHET to consider what other testing priorities might be considered once the current sweep of nursing homes has been completed. CMO noted the importance of the HSE public health leadership determining the priorities and activities of the testing and tracing function.

HSE COO explained that at present the volume of swabs carried out by the NAS is considerable. As non-COVID care increases, it is expected that the NAS will be required to step back from that kind of volume. One potential model is currently in use in the disability sector whereby staff in the facility are carrying out swabbing. CMO noted that it would seem reasonable for hospital groups if not individual hospitals to be self-sufficient in terms of both swabbing and testing staff and patients.

Minister Harris raised the issue of what appear to be disparities in the length of time for a test result to be returned in some locations. HSE COO confirmed that the HSE believe these disparities to be related to technical issues and improved data is allowing the HSE to identify bottlenecks and other problems so as to resolve them quickly.

HSE CEO confirmed that there are sufficient staff trained to carry out contact tracing in general but public health personnel are a constraint particularly for complex cases.

# **PPE**

HSE CEO advised that a report is being prepared for the HSE Board in relation to PPE costs, volume and the now very significant reach of supply that the HSE are providing. The report will be provided to the Department. The price of PPE has risen substantially on the global market.

It was noted that the State is now supplying a considerable volume of PPE to private, for-profit institutions.

### **Long Term Care**

CMO advised that NPHET will produce a paper outlining actions taken across the long term residential care system and the evidence base for them. There is no epidemiological evidence that visitors to nursing homes introduced infection as there was low community prevalence at the time

and virus outbreaks occurred in residential settings two to three weeks after visitor restrictions were put in place.

Minister Harris noted protocols for discharging patients from acute settings to long term care, including the testing regime.

The scale of the supports being provided to nursing homes was noted, including staff, PPE and financial supports.

# Mobile app

HSE CEO advised of the work underway on the app project and subject to completion of development and testing it is hoped to submit a Memo to Government in the coming weeks. It was noted that the app is one part of a very large tracing programme.

### **Private Hospitals**

The Minister emphasises the importance of the HSE project underway to effectively utilise these facilities. The focus on directing non-COVID work to private hospitals continues, and the HSE Chair noted that the HSE Board will consider a paper addressing non-COVID care covering care clinical priorities and how to best put those into operation.

CMO noted the continuing need for surge capacity.

#### **Non-COVID Health and Social Care Needs**

Minister Harris raised the matter of community services, particularly for children with disabilities.

HSE COO said that many staff in community services have been redeployed to the COVID-19 effort, with a resulting effect on staffing mix in the community. However, the HSE is working to get services including community therapists and home help support back on track as soon as possible. Identifying where innovative solutions have been found and keeping those going forward will be important.

# AOB

The procedure for the submission of Department of Health reports to Government in line with the Roadmap for Reopening Society and Business was noted. HSE input will be required and the Secretary General will liaise with the CEO.

NPHET will continue to communicate by letter to Minister Harris and/or HSE CEO as appropriate, and those letters will be published. It was agreed the NPHET procedures as discussed at the previous meeting are working very well.